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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	PTU030008
First Named Inventor	Chandra Mohan, et al.
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTEGRATED CELLULAR/PCS-POTS COMMUNICATION SYSTEM

the specification of which

(Title of the Invention)

- is attached hereto
OR
 was filed on (MM/DD/YYYY) **May 12, 2004**

as United States Application Number or PCT International

Application Number

PCT/US04/14854

and was amended on (MM/DD/YYYY)

(If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(e)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

ApplicationNumber(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/519,595	November 13, 2003	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/01 (10-00)

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DECLARATION — Utility or Design Patent Application

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Address	Thomson Licensing Inc.			
Address	PO Box 5312			
City PRINCETON	State NJ		ZIP 08543-5312	
Country USA	Telephone (609) 734-6834		Fax (609) 734-6888	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name	CHANDRA		Family Name MOHAN or Surname	
Inventor's Signature			Date 01-15-05	
Residence: City CARMEL	State INDIANA	Country US	Citizenship INDIA-US	
Mailing Address				
Mailing Address 12970 Fleetwood Drive North				
City Carmel	State Indiana	ZIP 46032	Country US	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name	JAYANTA		Family Name MAJUMDAR or Surname	
Inventor's Signature			Date	
Residence: City CARMEL	State INDIANA	Country US	Citizenship INDIA	
Mailing Address				
Mailing Address 5901 Sandalwood Drive				
City Carmel	State Indiana	ZIP 46033	Country US	
<input type="checkbox"/> Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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PTO/SB/91 (10-00)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted
With Initial
Filing

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	PTU030008
First Named Inventor	Chandra Mohan, et al.

COMPLETE IF KNOWN

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INTEGRATED CELLULAR/PCS-POTS COMMUNICATION SYSTEM

the specification of which *(Title of the Invention)*

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OR

was filed on (MM/DD/YYYY) **May 12, 2004** as United States Application Number or PCT International

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			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

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I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

ApplicationNumber(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/519,595	November 13, 2003	<input type="checkbox"/>

[Page 1 of 2]

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PTO/SB/01 (10-00)

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DECLARATION — Utility or Design Patent Application

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Address	PO Box 5312			
City PRINCETON	State NJ	ZIP 08543-5312		
Country USA	Telephone (609-734-6834)	Fax (609) 734 - 6888		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name CHANDRA		Family Name MOHAN or Surname		
Inventor's Signature				Date
Residence: City CARMEL	State INDIANA	Country US	Citizenship INDIA	
Mailing Address 12970 Fleetwood Drive North				
City Carmel	State Indiana	ZIP 46032	Country US	Citizenship
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name JAYANTA		Family Name MAJUMDAR or Surname		
Inventor's Signature <i>Jayanta Majumdar</i>	Date 8/12/04			
Residence: City CARMEL	State INDIANA	Country US	Citizenship INDIA	
Mailing Address 5901 Sandalwood Drive				
City Carmel	State Indiana	ZIP 46033	Country US	Citizenship
<input type="checkbox"/> Additional Inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Chandra Mohan, et al.
Title	Integrated Cellular/PCS-POTS Communication System
Art Unit	
Examiner Name	
Attorney Docket Number	PTU030008

I hereby appoint:

 Practitioners at Customer Number**Customer Number 24498***OR* Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

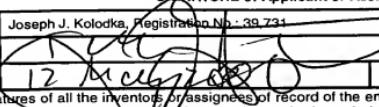
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 Firm or Individual Name **Joseph J. Laks, Vice President**Address **THOMSON LICENSING INC.**Address **P. O. BOX 5312**City **PRINCETON** State **NJ** ZIP **08543-5312**Country **USA**Telephone **609-734-6819** Fax **609-734-6888**

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).***SIGNATURE of Applicant or Assignee of Record**Name **Joseph J. Kolodka, Registration No.: 39,731**Signature Date **12/14/2008** Telephone **609-734-6816**NOTE: Signatures of all the inventors/assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*. *Total of **_3_** forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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F-92100 Boulogne-Billancourt
France

do hereby grant

Joseph J. Laks
Vice President
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from July 1, 2005

DATED this 14th day of February, in the year 2006.

Signature:

Typed Name As Signed:

Title:

Béatrix de Russé
Authorized Representative,
Vice-President Intellectual Property & Licensing

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Two Independence Way
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from July 1, 2005.

DATED this 27th day of February, 2006.

SIGNED


Joseph J. Laks
Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING

WITNESS


David Fornavotto